

RECEIPT # 404408
 AMOUNT \$ _____
 SUMMONS ISSUED _____
 LOCAL RULE 4.1 _____
 WAIVER FORM _____
 MCF ISSUED _____
 BY DPTY. CLK. _____
 DATE _____

Plaintiff, pro se

FILING FEE PAID
 RECEIPT # 404408
 AMOUNT \$ 5.00
 BY DEPT. CLK. KH
 DATE 9-23-04
 U.S. DISTRICT COURT

SEP 23 10:36

UNITED STATES DISTRICT COURT

DOMINGO PEÑA

Plaintiff,

vs.

UNITED STATES OF AMERICA

Defendant(s)

04-40191

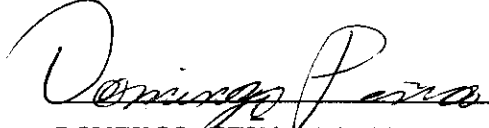
Civil Case No. _____

AFFIDAVIT OF POVERTY

COMES NOW, DOMINGO PEÑA, the Plaintiff in the above entitled cause, and states under his oath and under the pains and penalties of perjury the following:

1. The Plaintiff is a federal prisoner, incarcerated at the FEDERAL MEDICAL CENTER DEVENS
P.O. BOX 879 AYER, MA 01432
2. Plaintiff is unable to pay the costs for the above-entitled cause of action, or give security thereof.
3. Plaintiff seeks redress of his grievances against Bureau of Prisons employees for violation of his Constitutional Rights. This Court has jurisdiction of this matter by virtue of 28 USC 1331 and Bivens v. Six Unknown Agents of Federal Bureau of Narcotics, 403 U. S. 388 (1971). Venue is vested by virtue of the provisions of 28 USC1391 (b).
4. Plaintiff is filing his Motion to Proceed In Forma Pauperis, and in connection therewith he attaches this Affidavit of Poverty so that the Court will waive his costs because he has no funds and is unable to pay.

Dated: 9-12-04


 DOMINGO PEÑA, Plaintiff, pro se